

GMR Shared Print Retention Task Force

FINAL REPORT

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National Network of Libraries of Medicine - Greater Midwest Region

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Executive Summary

Both university and health sciences libraries (HSLs) are feeling pressure with regard to their collection space, with other campus units pressing them to remove print materials and release the space those collections occupy for other uses. Many HSLs have already begun to withdraw print materials that they have available in electronic format. Resource Libraries of the National Network of Libraries of Medicine (NNLM RLs) that have not yet taken this step are concerned that they will become the preserver of print collections by default. Hospital libraries are concerned that they will lose access to needed materials within the region. The National Library of Medicine (NLM) is concerned with similar issues as they apply to the medical literature in general and to health sciences libraries nationally.

Beginning with the September 2009 meeting of the Greater Midwest Region (GMR) Resource Library Directors, GMR staff held a series of conversations with resource library directors throughout the region and conducted a survey of RLs in March 2010 which confirmed the anecdotal impression that space pressures and collection concerns were a major issue. In February 2010, a related conversation began with Committee on Institutional Cooperation (CIC) leadership to explore possible shared print retention project synergies. Concurrently, GMR staff were completing their proposal for the next 5 year NNLM subcontract for the region, with intent to respond to NLM's call for enhancement projects of benefit to the region.

A GMR Print Retention Task Force was appointed in September 2010 and tasked with analyzing the data obtained in the GMR RL survey, looking at DOCLINE holdings data, interviewing RL Directors and others in the region to identify interests and scope, and recommending an action plan for the design and implementation of next steps. A second survey was sent to Region 3 Network libraries in March 2011 to get input from the non-Resource Libraries about their plans regarding print retention.

The Task Force confirmed that there was wide interest among GMR network members in developing guidelines and planning solutions to ensure future access to core resources. However, print retention is difficult to consider just from a regional perspective; it requires a national view, and one connected with other non-health sciences initiatives that have overlapping coverage (for example STM research journals). The primary Task Force recommendation, strengthened by input from NLM was:

The National Library of Medicine should take a leadership role in convening a national group representative of all its regions to explore the issues of shared print retention for both serials and monographs. NLM should contribute its expertise and its leverage to suggest national best practices and guidelines for maximizing current and future access to resources that are critical to the patient care and biomedical research enterprises of network members.

NLM has agreed to provide a framework for further exploration with the following next steps:

1. Discussion at the RML Directors meeting followed by informal meeting at MLA for all members in Minneapolis May 2011 for NLM to solicit input from libraries in all regions
2. Consideration of forming a task force going forward that includes representatives from the regions with a goal to start recording retention commitments in DOCLINE by fall 2011.

Background

Both university and health sciences libraries (HSLs) are feeling pressure with regard to their collection space, with other campus units pressing them to remove print materials and release the space those collections occupy for other uses. Many HSLs have already begun to withdraw print materials that they have available in electronic format. Large resource libraries (RLs) that have not yet taken this step are concerned that they will become the preserver of print collections by default. Hospital libraries, under their own space pressures, are concerned that they will lose access to needed materials within the region.

NLM is concerned with similar issues as they apply to the medical literature in general and to health sciences libraries nationally. While NLM is committed to be a permanent holder of its print collections, they are concerned that:

- NLM cannot be the only holder of some of the most important titles
- NLM does not own approximately 25,000 of the titles in DOCLINE reported to that database for resource sharing amongst network libraries, although many are admittedly of local interest only.
- NLM cannot dictate what the print retention guidelines should be for other library collections
- NLM staff are hearing that DOCLINE holdings records are not always updated when print collections are withdrawn, thus diluting its accuracy as a reporting tool.

Within the National Network of Libraries of Medicine, a Print Retention Task Force of the Southeastern/Atlantic Region (Region 2) addressed this issue in 2010, resulting in a report [1] that concluded with several recommendations, among them that the National Library of Medicine should “lead in the development of print retention/preservation/repository pilot projects with the goal of creating national guidelines,” and that “additional funding should be provided to Regional Medical Libraries for related initiatives.”

Another conversation in the health sciences arises out of a broader effort initiated in 2008 by the Association of Academic Health Sciences (AAHSL) called the “Chicago Collaborative” which is a working group of representatives from key science, technology and medicine (STM) publisher organizations, editorial associations and library associations. Among their recent work was a special facilitated discussion on ensuring persistent access to the scientific record [2], which addressed the challenges of e-journals, underlying data, and “everything else” such as grey literature and multimedia educational materials. One of the understandings is that preservation is a shared responsibility of both libraries and publishers. The National Library of Medicine was represented at this meeting.

The conversation about space and the possibilities of collaborative print retention is not limited to health sciences libraries, and in fact has gained significant momentum in the past several years among research libraries and others. There are a number of national and regional projects underway. For example, WEST (Western Regional Storage Trust) with nearly 89 libraries west of the Mississippi with funding from the Mellon Foundation is working on evolving business models, policies and operations for coordinated shared print archiving [3]. The CIC (Committee on Cooperation) is working on a shared print repository project and the necessary business model that would start with 250,000 volumes of STM journals to be housed in a new storage facility at Indiana University [4]. In the Midwest, OhioLINK staff are working with Ohio’s university librarians to develop and pilot de-duping procedures. In the southeast [5], ASERL (Association

of Southeastern Academic and Research Libraries) has a journal retention project based on local interests, and is evaluating a draft proposal for cooperatively retaining sets of little-used print journals [6], and the TRLN (Triangle Research Libraries Network) has explored a single copy initiative [7]. OCLC Research has produced a number of studies that address this issue, most recently one entitled “Cloud-sourcing Research Collections” [8] and Ithaka’s 2009 report “What to Withdraw” brings the publisher perspective to the table [9] with the JSTOR [10] and Portico [11] connections. A notable omission from many of these reports is any mention of the National Library of Medicine or its network as pertains to the scope of their collective resource holdings, any unique concerns that would need to be addressed, or how the health sciences community could be part of the collective discussion to find nationwide solutions.

Print Retention in the Greater Midwest Region (Region 3)

Between July 2009 and January 2010, GMR staff held a series of conversations with resource library directors throughout the region and conducted a survey of Resource Libraries in March 2010 which confirmed the anecdotal impression that space pressures and collection concerns were a major issue. [Full results are in Appendix A]. Twenty nine of 31 Resource Libraries responded to the survey, equally divided between those reporting to a University Library and those reporting to a Health Sciences Center. Among the findings:

- 83% are engaged in planning conversations at their institution regarding space and collections
- 65% are facing pressure to reduce or repurpose library space and are already conducting large scale print reduction projects (mainly shifting to e-only subscriptions, and reducing duplication among campus libraries)
- 59% have access to a remote storage facility
- 55% are participating in or talking about cooperative retention projects, and 90% would be interested in exploring the potential further
- Only 38% are currently participating in any large scale digitization projects (such as the Google Books project).

Many respondents suggested ways to continue the conversation within the Region, although there were several comments that it might be too late as retention decisions and withdrawals are already taking place without any systematic coordination. A comment was also made that our Resource Libraries are very diverse, so that a “one size fits all” solution is not likely.

In March/April 2011, GMR members not covered by the previous survey of Resource Libraries were surveyed. In total, 107 participants responded to the survey; two-thirds affiliated with hospitals and one-third academic institutions. Over all, respondents expressed a high level of interest in the issues prompted by this survey and hope to pursue projects and strategies at their own institutions as well as at the regional and national level. Many participants agreed regional or national guidelines could aid in collection development decisions, demonstrate value, and garner support from administration as well as guarantee the longevity of print materials in the future. [Full results are in Appendix B].

- 75% were currently planning for space and collections (Resource Libraries: 83%)
- Roughly 64% faced pressure to reduce or repurpose library space (Resource Libraries: 65%)

- 31% have access to a remote storage facility (RL: 59%)
- 20% were currently participating in or planning cooperative print retention projects (RL: 55%) but 72% were interested in exploring such projects (RL: 90%)
- 57% were not concerned about discarding unique materials
- 89% were interested in exploring or establishing regional or national guidelines and standards

Comments across several questions implied that respondents are assuming other libraries are monitoring or taking care of retaining unique items with one person responding “I’m sure what we have is owned by local universities (which I hope aren’t purging)” and another “...SOMEONE has to archive stuff, even widely-held materials will be gone forever if we all think someone else is retaining them.”

In looking at results from the two surveys together, space pressures and interest in guidelines are similar in resource and non-resource libraries, showing a broad interest across the region in the issue and a coordinate response to it. Differences appear in current activities and resources, with the Resource Libraries much more likely to have access to a remote storage facility and to be currently participating in cooperative planning projects.

Planning for Print Retention in the GMR

Concurrent with the 2010 Resource Library survey, and informed by it, the GMR staff was completing its proposal for the next 5 year NNLM subcontract for the region, with intent to respond to NLM’s call for enhancement projects of benefit to the region. As expected, there was mention of a collaborative print preservation initiative in the RML RFP in the Statement of Work A5 (c) (6), which read: “All Resource Libraries and the RML must agree to: Participate selectively in a regional program for the retention and preservation of print serials and monographs in multiple U.S. locations.” There was also enabling language in the Statement of Work A5(b) that “The RML will negotiate with Resource Libraries that are willing to develop projects that will build on their expertise to address the needs of the Region and to enhance the Resource Libraries’ ability to contribute to their institutional goals and priorities. Finally, based on enabling language in the RFP Statement of Work, UIC submitted an Enhancement Proposal related to “Developing a Print Retention and Preservation (PRP) Program for the Greater Midwest Region.” The proposal called for appointing a Print Retention Working Group with broad representation from the region and with a charge to conduct an environmental assessment of existing regional and national PRP activities, coordinate the development of a regional PRP program during Year 1 of the contract, and plan and implement a regional symposium on print retention and preservation for Year 2 of the contract. The proposal recommended that a subcontract be issued to one Resource Library in the region to provide oversight for the activities of the Working Group, with funding to pay for a project manager and expenses related to the regional symposium. As of this writing, it is not known if the enhancement proposal will be funded. However, it is considered to be unlikely, given the current federal budget situation.

During this period, a related conversation began with several CIC health sciences librarians and Mark Sandler, Director of CIC’s Center for Library Initiatives, to explore possible shared print retention project synergies, as CIC was ramping up planning for a Shared Print Collections and Storage project. The CIC is a consortium of Big Ten universities plus the University of Chicago, all of which are located within the Greater Midwest Region except Penn State University. Nine

of the GMR's largest Resource Libraries are part of CIC and decisions made by the CIC libraries have the potential to have a major impact on resource sharing in the GMR. An informal meeting was arranged with Mark Sandler in Washington DC during the 2010 MLA meeting, which was attended by several CIC health sciences libraries directors, and Martha Fishel and Maria Collins from NLM. Mark confirmed that CIC directors were working on a shared print preservation plan and working with consulting firm R2 on analysis and planning, and were considering a focus on STM journals. Martha and Maria confirmed that it would be possible to generate a holdings analysis based on DOCLINE information, but cautioned that the information would need to be validated by the reporting libraries and the accuracy of the holdings data confirmed. The group discussed whether to use PMC titles or AIM titles or both as the basis for the first analysis and planning. NLM is looking at AIM titles already, but some resource libraries thought PMC titles would be more useful. This led to a discussion of the reliability and permanence of PMC archives. NLM has verified PMC holdings to the page level, though the quality of images in particular is not uniform across the corpus.

At the meeting, the group agreed to form a planning task force to work on these issues further. A call for volunteers among Resource Libraries was issued to serve on a short term GMR Print Retention Task Force, with representation from both CIC and non-CIC health sciences libraries, and from both public and private institutions, as well as a representative of NLM (Martha Fishel) and from OhioLINK/Ohio State (Lynda Hartel). Jane Blumenthal (University of Michigan) and Linda Watson (University of Minnesota) agreed to co-chair. Other members included Anne Moore (University of South Dakota); Neal Nixon (University of Louisville); Andrea Twiss-Brooks (University of Chicago); Linda Walton (University of Iowa); Kate Carpenter (University of Illinois at Chicago) and Ruth Holst, GMR Staff. The Task Force got underway in September 2010 with a charge to

- Identify what data set from the DOCLINE holdings database would provide the most useful information about the state of shared journal holdings in the region to answer such questions as How many titles fall into the “endangered” category? Who in the GMR owns each title?
- Determine how to analyze the DOCLINE data and the results from the March 2010 Resource Library Print Preservation Survey
- Monitor, and incorporate as needed, the stated objectives and relevant activities of the National Library of Medicine, the Committee on Institutional Cooperation (CIC), OhioLINK, Western Regional Storage Trust (WEST), California Digital Library (CDL), and other organizations with an expressed interest in assisting libraries to achieve their print retention and preservation goals
- Conduct focus group interviews with Resource Library directors and other key stakeholder librarians from the region
- Recommend a process for the design and implementation of a print retention and preservation program for the GMR during the 2011-2016 contract.

Discussions of the Task Force

The Task Force conducted all of its work via email and telephone conferences, and used Google Docs as collaborative space. Early discussions wrestled with the question of scope: what segment(s) of our collections to address. The general sense was to focus on legacy print serial

collections recognizing that “the train had already left the station” with regard to cancelled current print subscriptions – something that NLM is concerned about, however, and would be worthy of broader national discussion. It would be easier for a RL to commit to maintain legacy volumes than to commit to maintaining print for current subscriptions in perpetuity. The Task Force discussed problems of varying journal coverage in digital archives as well as in print holdings in terms of editorial and non-editorial content. Not all libraries bound “cover-to-cover”, for example.

The Task Force attempted to draft some principles for print retention collaboration:

- Locally important materials would be the responsibility of a resource library who would commit to retaining
- Focus for a project should be on more scholarly materials first

Martha Fishel noted that there are two ways to indicate retention in DOCLINE. One is to enter the appropriate value in the “commitment level” field: (Z) No special commitment to retain title (N) Will hold title for national commitment (R) Will not cancel title without notifying resource libraries (S) Will hold title for state commitment and (C) Will hold title for consortium/local commitment. The other is to use the “retention policy” field to indicate that a title is permanently retained or retained for a limited period. There is also a “completeness” field with 4 values (0) Information not available or Retention is limited (1) Complete (95%-100% held) (2) Incomplete (50%-94% held) and (3) Very incomplete or scattered (less than 50% held). Staff from NLM believe that the commitment levels were originally developed with the RMLs and can be revised at the recommendation of the RMLs.

The Task Force followed Region 2’s lead by analyzing reports of DOCLINE holdings prepared by NLM staff:

- Region 3 Titles with 3 or fewer holding libraries and NOT HELD AT NLM
- Region 3 Titles with 3 or fewer holding libraries and HELD AT NLM
- AIM Titles (Task Force Members annotated their holdings). The original list of AIM titles (Abridged Index Medicus) is 150 titles. This list includes all title variations, for a total of 275 titles. “We [NLM] think this list represents a core group of titles that should be ear-marked for print retention in every region. How many copies needed is uncertain. But, given that many of these titles have been digitized and archived back to vol. 1, number 1, it is also a good list to use in determining what titles could be removed from a collection for downsizing”.

Analysis of DOCLINE Data

Region 3 Titles: Task Force members noted problems with the data not being accurate, the Not-at-NLM list included items with little regional/national interest (mainly local), some felt the foreign language resources could be explored further while others indicated foreign language is not in demand, need to maintain access to clinical titles for the hospital libraries in the region who are losing space, questions regarding ability of separating core clinical titles from research titles in DOCLINE holdings lists. The Task Force questioned DOCLINE accuracy and the workload necessary to correct holdings and work with these lists; local catalog and OCLC

holdings were believed to be more accurate for all. The group felt like there are other lists for focus before turning to this.

Discussion shifted to the possibility of exploring most-requested ILL titles, especially those titles requested by hospital libraries. This discussion returned the group back to the Abridged Index Medicus discussion we had previously. What if holdings were reviewed for this relatively short list of core clinical titles? Even among just the task force libraries, there are multiple complete runs of most titles. There are some gaps, mostly in very old or very recent issues.

Discussion and Recommendations

Print retention is difficult to consider just from a regional perspective; it requires a national view, and one connected with other non-health sciences initiatives that have overlapping coverage (for example STM research journals). The issues of print and electronic are intertwined. Detailed analysis and planning not feasible for a volunteer group of library directors; there is a need to invest in paid consultants to move forward more aggressively, or combine forces with other national initiatives, or start small.

The Task Force had the following recommendation which involves the National Library of Medicine, which is followed by commentary from Martha Fishel, a key consultant to the Task Force.

The National Library of Medicine should take a leadership role in convening a national group representative of all its regions to explore the issues of shared print retention for both serials and monographs. NLM should contribute its expertise and its leverage to suggest national best practices and guidelines for maximizing current and future access to resources that are critical to the patient care and biomedical research enterprises of network members. This work should be coordinated with other national and regional efforts to ensure that the unique concerns and the considerable strengths of the national network of libraries of medicine are recognized. The National Library of Medicine should investigate the compatibility between DOCLINE and OCLC for holdings data with a goal to ensure interoperability between them.

Notes from NLM Added May 4, 2011

NLM has participated in the work of this task force, and that of a similar task force in Region 2, the Southeastern Atlantic Region. Region 1, the Middle Atlantic Region, also recently invited NLM participation in a Special and Historical Collections Meeting held at the New York Academy of Medicine on March 25th. They too were planning to form a task force to examine print retention of journals in the region, but have agreed to wait until the reports from Regions 2 and 3 are available, as many common themes have emerged. Those include:

Common Themes

1. In general, medical libraries are facing pressure to reduce or repurpose library space, and many have already begun by removing back issue journals collections from their stacks
2. Libraries are worried about the loss of the archival record.

3. Digitized content is a concern in the areas of quality, future access, and confidence in digital preservation standards.
4. Journals is the only format currently under consideration for a national Print Retention Program
5. NLM cannot be the only holder, unless they already are.
6. The optimum number of copies to retain will be driven by factors such as not requiring participants to validate at the page or issue level.
7. The criteria to identify a reasonable set of journals to retain have been studied in depth by regions 2 and 3, and at NLM. NLM also discussed this issue with invited consultants.
8. Most academic libraries no longer subscribe to print, so a national print retention program would only include retrospective print holdings.

Decisions

Some decisions have been made at NLM that will provide the framework for this program for the near future. We consider this to be a pilot project, as the identified set of journals is small.

1. A set of ~250 AIM / PMC titles have been identified and organized by main title with all former titles listed separately and in chronological order. These are core clinical titles widely held in the NN/LM. The PMC titles are only those 90 titles that were fully digitized as part of the back issue scanning project 2003-2010. Justification for this decision was made on recommendations from our consultants, and the knowledge that this material is still the most widely cited and widely requested.
2. 12 copies is the recommended minimum number to keep. This relatively high number is justified by the fact that we will not require validation at the page level.
3. Validation will be at the volume level only, and libraries agreeing to commit will be required to make that validation and update their holdings accordingly.
4. In-tact journals only will be a requirement. By this, we mean journals that have all of their parts in place including covers, tables of contents, advertisements and administrative matter.
5. DOCLINE has been deemed an appropriate source for retention data. Justification for this decision is based on several factors including:
 - a. OCLC / WorldCat does not yet have a field established for recording commitment for print retention. Discussions have long been underway without resolution.
 - b. A commitment field in DOCLINE was established in the early 1980s, and has not really been populated for any purpose.
 - c. Record maintenance will be simple. It's a one-character field
 - d. Simple reports can be generated by all DOCLINE participants.
 - e. NLM can easily perform analysis of holdings and commitments and make recommendations to regional participants.
6. The model for the NN/LM will be one of distributed holdings. Ideally, all titles will be held in all 8 regions
7. Existing summary level 3holdings will remain the standard
8. Participants will self-select. NLM and RML libraries will not force participation on any library unwilling to volunteer
9. There is little likelihood that participants will receive additional funding for any work associated with maintaining holdings records, etc

Next Steps

1. Informal Meeting at MLA in Minneapolis May 15, 2011 - NLM hopes to hear from libraries in all regions
2. Decisions will need to be made about whether we have a task force going forward that includes representatives from the regions
3. Prepare an MOU acceptable to all
4. At NLM, make necessary changes to DOCLINE for input and reporting
5. Establish participation
6. Start Recording Commitments by fall, 2011!

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APPENDICES

Appendix A **Resource Library Survey – March 2010**

Appendix B **Non-Resource Library Survey – March/April 2011**

Non-Resource Library Directors Survey Results

NN/LM Greater Midwest Region

Spring 2011

Executive Summary:

Logistics:

In total, 107 people participated in this survey. Two-thirds of respondents were affiliated with hospitals, 1/3 with academic institutions.

Current Space/Collections Projects:

Over 60% of participants are facing pressures to reduce or repurpose their space with 75% currently planning such activities and 46% participating in large print reduction projects. A large number of those currently not engaged in planning activities are not because library collections and/or space has already been reduced.

Cooperative Print Retention Policies:

Concerning cooperative print retention policies or projects, 80% of respondents admitted they were not participating in these types of activities currently. However, there was an extremely high level of interest in establishing regional or national guidelines and standards for print retention with 72% expressing interest in exploring the issue further. Alarming, comments across several questions implied that respondents are assuming other libraries are monitoring or taking care of retaining unique items with one person responding "I'm sure what we have is owned by local universities (which I hope aren't purging)" and another "...SOMEONE has to archive stuff, even widely-held materials will be gone forever if we all think someone else is retaining them."

Though 59% of participants stated they do have specific retention policies, most of the comments indicated these are not formal or written. Many actually admit they are unspoken policies or based on other factors, such as space, cost, usage statistics, or ILL requests.

Discarding Materials:

Though 57% of respondents claimed they were not concerned with discarding materials that otherwise should be archived, according to the comments, most are still checking local, state, or national holdings to ensure they are not discarding unique items.

Overall, there was a high level of gratitude and interest in the issues prompted by this survey. Many participants hope to pursue these issues more thoroughly at their own institutions.

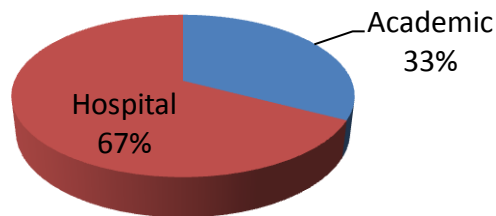
Individual Question Responses

The following section provides an overview of participant responses for each individual question and major themes or trends emerging.

Q1: Indicate the type of library in which you work:

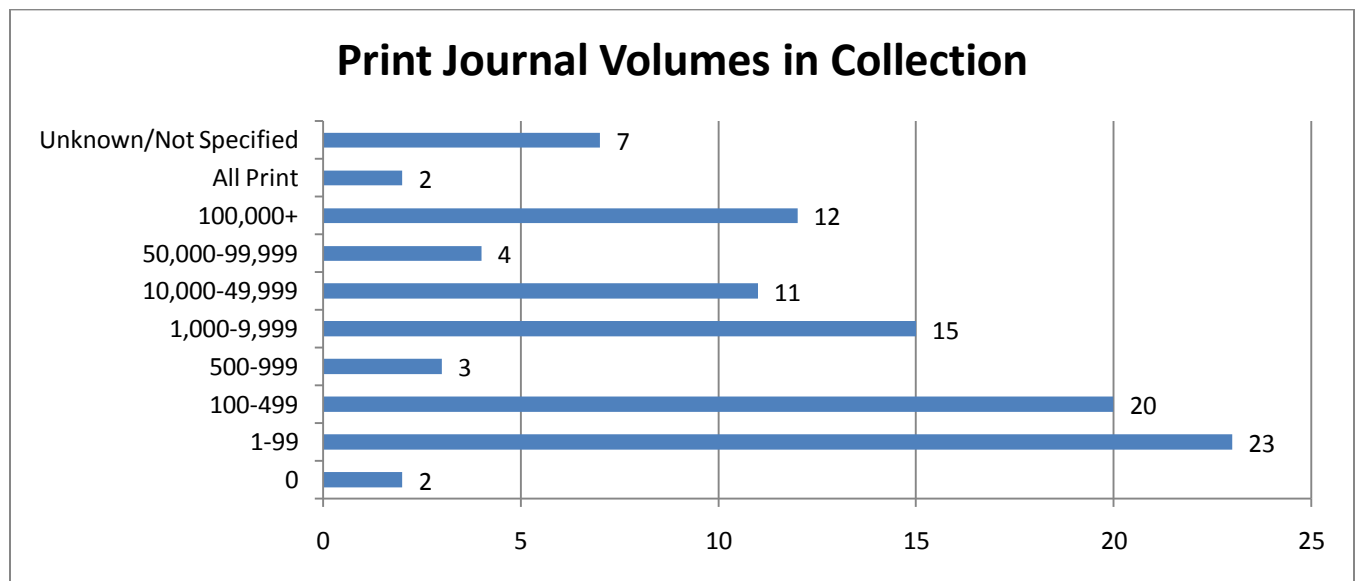
68.7% of respondents reported working in a hospital library or clinical setting; 33.3% in an academic library. Those who included comments identified themselves as 'special cases' including two professional associations; one VA; two non-profit settings, including a public health association; special clinical/research centers; and one currently unemployed respondent.

Library Affiliation



Q2: What is the approximate number of print journal volumes in your collection?

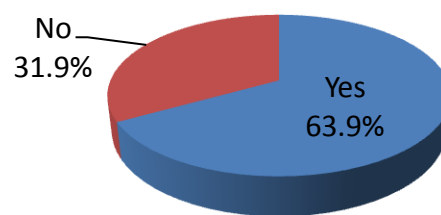
The number of print volumes housed in library collections greatly varied with two libraries reporting no print journals and two all print. However, the majority of respondents provided a specific number of holdings ranging from 0-309,000 with 43% reporting housing between 1-499 print volumes. The following chart provides a scale displaying the number of libraries who reported specific volumes. Many respondents shared a range of methods for managing these collections. One respondent keeps volumes for only five years, another keeps a 10 year back file of journal titles. Many responded that most of their print are not current subscriptions, but fill in the gaps left by electronic volumes.



Q3: Are you currently facing pressure to reduce or repurpose your library space, or, do you anticipate receiving such pressure in the near future?

Unfortunately, the trend to reduce or repurpose library space is fairly universal in this sample, with few exceptions. Most libraries report having to reduce their space by 33-80% either in the immediate past or currently. Many are moving to new smaller locations to make way for other uses of the space, such as student work space, hospital departments, research, or storage spaces. Another trend is pressure from administration (only one specified library administration, others just stated 'administration' in general) to either completely remove print, transfer to a remote location, or remove older titles to make space for new titles. In addition, many are moving to electronic volumes to reduce costs (ie: binding), expand access, and remove print duplicates for study spaces. Finally, these activities have been happening steadily over the past few years. One respondent reported having these issues five years ago; others are facing them now or in the immediate future.

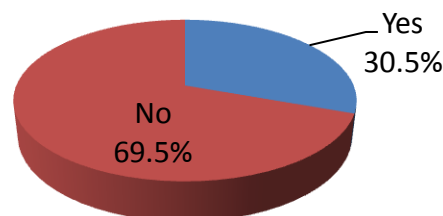
Pressure to Reduce/Repurpose?



Q4: Do you have access to a remote storage facility?

Nearly 70% of respondents to this survey reported having no remote storage facility for their print volumes. Of those who provided comments to this question, three commented that they either used to have remote storage or will soon get rid of remote storage because of cost or moving to a new location. Two respondents commented they did not have enough physical volumes to warrant a remote storage facility. Others simply store volumes on-site in local storage rooms within the library or greater building.

Remote Storage Available?

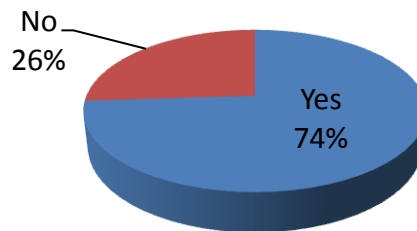


Q5: Are you engaged in planning activities at your library regarding your space and collections?

Nearly 75% of libraries in this sample admitted to current space or collection planning activities.

Additional comments seem to fall into two major categories concerning space planning activities: 1) this is an on-going process and worry or 2) not currently planning because of other factors, such as loss of space, budget issues, going all online, no voice in planning, or no control over library space, which mirror the responses in question 6.

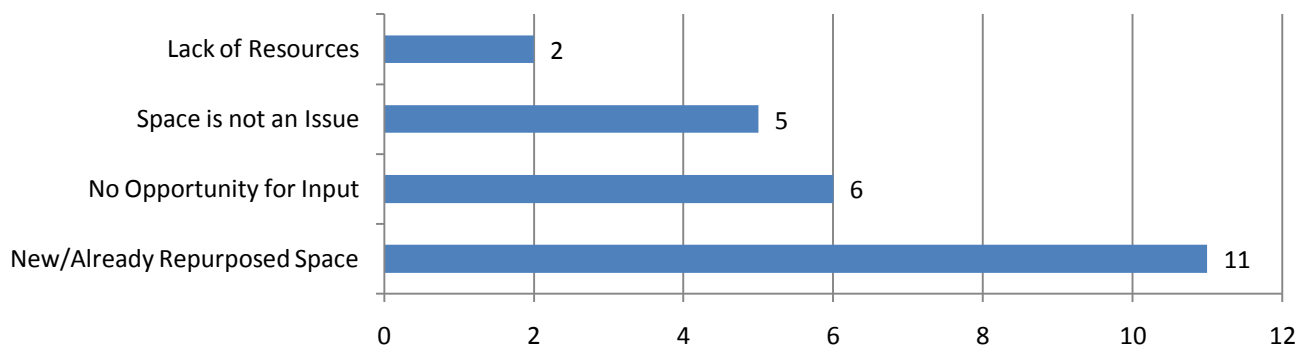
Current Space Planning Activities?



Q6: If you answered "No" to question 5, why not?

Responses to this question actually did not widely vary and fell into four broad categories: lack of resources; space/collections are not a current issues; the respondent was not in a decision-making position or the library had no control over space; and library had recently moved or repurposed space. The following graph summarizes the responses:

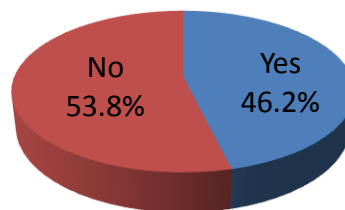
Reasons for No Current Space Planning



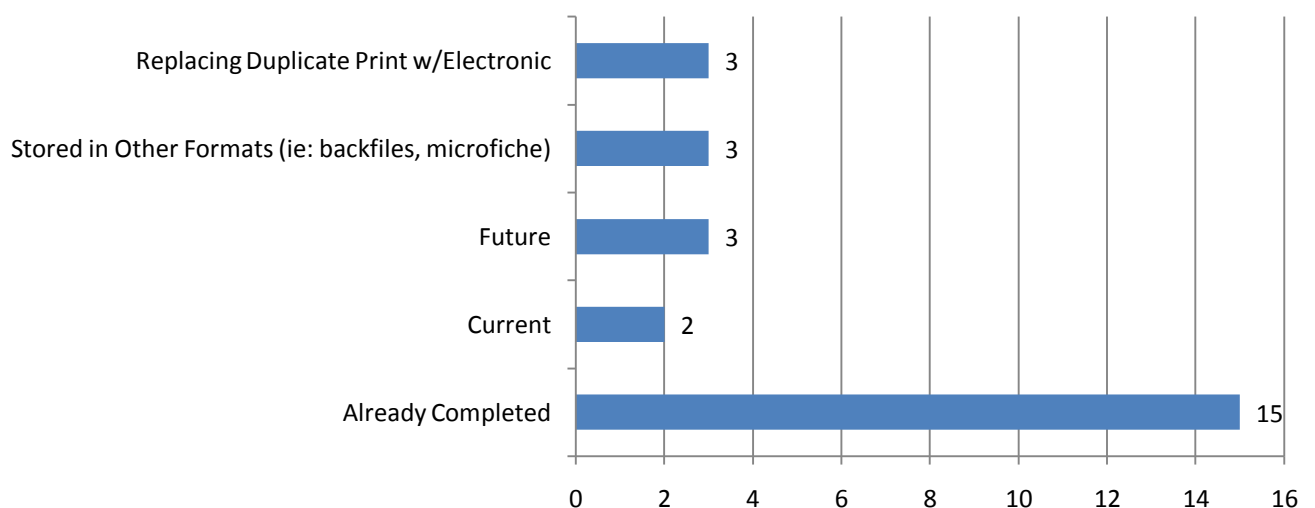
Q7: Are you participating in or planning any large scale print reduction projects?

Though respondents were approximately split in half concerning if they were or were not participating or planning on large scale print reduction projects, the majority of comments suggested many have already completed such projects. Some respondents have weighed the cost of print versus electronic subscriptions and have elected to move to online titles and drop the print version (though they are keeping the older print volumes). Others are still storing the same print in other formats, such as microfiche or purchasing back files of volumes.

Large Scale Print Reduction Projects?



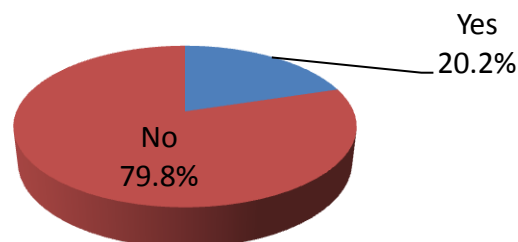
Status of Large Scale Print Reduction Projects



Q8: Are you participating in or planning any cooperative retention projects?

Only 20% of this sample were currently participating in or planning cooperative retention projects. In analyzing the comments of respondents, there are no consistent methods or levels of cooperative retention. In general, there seems to be profound interest and discussion around these projects, but very few are currently being implemented. These projects are occurring mostly at the institutional or state level. For example, one respondent replied working with the University Library (as they were at a hospital library) to coordinate retention. Two respondents mentioned projects on the state level, with one in the works. In addition, one respondent replied their 'cooperative retention project' was checking to see if other library holdings in their state or nationally before discarding.

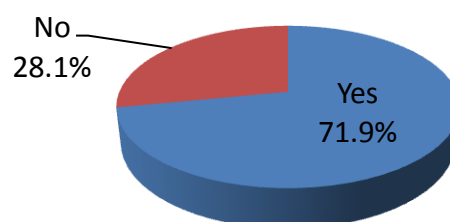
Cooperative Retention Projects?



Q9: Would you be interested in exploring potential cooperative retention policies or projects?

Confirming the comments from question 8, there is a large interest in exploring cooperative retention projects. One respondent believed cooperative projects, especially outside their own institution, could help them stand up to their own administration. However, comments suggest a number of barriers to attempting such projects, including time, scale, space limitations, administration support, not appropriate at their institution, or not appropriate at their level--only state, regional or national level would be logical. In addition, there seems to be an assumption that other institutions are or will be performing such projects without any evidence. For example, one respondent replied that "I'm sure what we have is owned by local universities (which I hope aren't purging)."

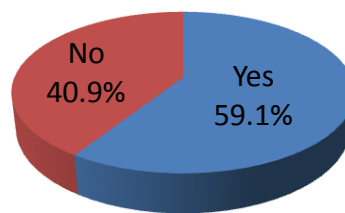
Interested in Cooperative Retention?



Q10. Have you developed specific journal collection retention policies and principles?

Despite 59.1% of this sample's respondents replying 'yes' to having specific journal collection retention policies, a majority of comments implied the opposite. Many respondents stated they have informal or 'unspoken' guidelines concerning retention, but nothing concrete or actually written in a policy. Others base retention on space, usage statistics, number of ILL requests, or duplication in electronic form. Only three respondents had specific timelines or policies. For example, the guidelines of one policy are as follows: "(1) Medical titles kept 20 years (2) Nursing titles kept 15 years (3) Hospital Administration titles kept 10 years. Exceptions: Much longer runs kept of Pediatric and Orthopaedic titles ----many kept back to vol. 1. (We operate a pediatric hospital and we have a very active orthopaedic residency program)." Two other respondents they kept for 25 years or had a 10-year backfile.

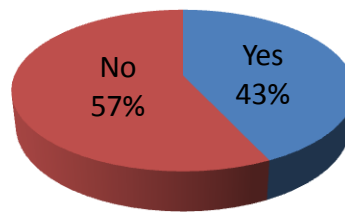
Journal Collection Retention Policies and Principles?



Q11: Are you concerned that you are discarding unique materials that should be archived somewhere?

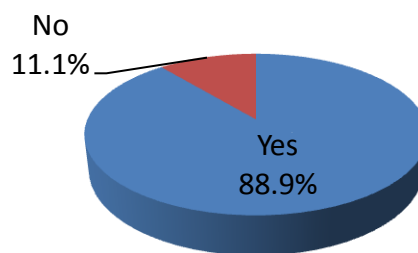
Though 57% of respondents claimed they were not concerned with discarding materials, according to the comments, most are still checking local, state, or national holdings to ensure they are not discarding unique items. Other respondents believe that they do not hold any unique items, however, one respondent made a very enlightening comment: “Our journals are not that esoteric. But SOMEONE has to archive stuff, even widely-held materials will be gone forever if we all think someone else is retaining them.” A concern of at least two participants was the accessibility of journal articles in the future with one commenting “I am very concerned that in years to come librarians and physicians will want articles that are no longer available.”

Concerned about Discarding Materials?



Q12. If there were national or regional guidelines on print journal retention, would you use them to make collection management decisions?

Use Retention Guidelines if Available?



Q13: Any final comments?

Final comments generally fell into four categories: additional information about current retention practices, concerns over the future of electronic v. print volumes, anticipation for guidelines or standards, and general thanks for investigating this issue.

A pattern of concern emerged across the survey was future problems with electronic volumes, including no cooperation from publishers, discontinuation of promised content, loss of power, and increased cost. One respondent specifically commented: "I retain print subscriptions and back issues... for two reasons: control over ownership of the material and cost effectiveness. If electronic journals ever evolve to the point where they can provide us with control over archived material and affordability, I could see further reducing or eliminating print content." Several other respondents were also concerned over cost of electronic journals in the future.

Finally, many respondents also expressed eagerness for established guidelines or policies and hoped these would emerge in the future.

Trends in Sequenced Responses

In synthesizing and coding participant responses, 63 unique sequenced responses were gathered from the data. The following categories describe the themes and trends emerging in the data.

New Construction/Spaces

Libraries that have, currently, or will be moving or repurposing their space are considerably less concerned with the future of print volumes and retention schedules than those libraries currently experiencing pressure to reduce or repurpose. For example, a library that downsized two years ago commented "We just moved. They shouldn't be asking us to do anything for a bit of time." However, this same respondent expressed concern over other issues related to collections, particularly the accessibility of electronic resources versus print resources "I am also very concerned when the publishers say they will maintain their journals 'forever' -maintaining servers is not cheap-at some point they may tire of it -and then all that information will be lost."

In addition, respondents experiencing new construction or moving have also lost or been forced to reduce their remote storage spaces. One participant commented "Our remote storage facility will no longer be available to us after we build our new library." In general, many of the respondents in this survey have very limited or no remote storage facilities.

New Hospital Libraries and Print Volumes

Two self-identified hospital libraries in this survey, in newly constructed hospitals, have elected not to purchase any print volumes or are receiving pressure from administration to get rid of all print volumes and only provide electronic access to library materials. However, one of these respondents expressed worry at the continued, long-term accessibility of electronic materials, the same concern as the above finding.

Reduction in Print v. Retention Policies

An interesting pattern has emerged in this small sample with libraries reducing print volumes. For the most part these same institutions are not using any formal policies to guide their weeding. In at least three cases, libraries have had major print reductions without consulting formal policies, though many admit to following unspoken policies. For example, one library lost 1/3 of their space within the last year, but admitted "Well, I have theories in my head, but not much written. It's mostly driven by space, so journals that eat shelf space are kept for shorter periods." Another respondent admits to being the force behind repurposing the library's space, but only uses ILL statistics, not uniqueness, to determine mechanisms for weeding. It seems that other factors are the major drivers of reducing print volumes, such as space, cost, usage statistics, ILL rates, and pressure from above.

No Reduction in Print v. Retention Policies

In opposition to the previous trend, those libraries not currently reducing their collection or experiencing pressure from administration are paying attention to the current environment and planning for the future of their collections. For example, one respondent shared they were not currently under pressure to relinquish their space, but had created very detailed and specific retention schedules: "Many years ago we set up the following guidelines: (1) Medical titles kept 20 years (2) Nursing titles

kept 15 years (3) Hospital Administration titles kept 10 years.” Another participant had the same strategy: “I do have a plan in mind if I am forced to cut space; this is not in the immediate future.”



Pressure v. Retention Policies

In general, libraries that are currently facing pressure from their institution to reduce or repurpose their space strongly advocated for standards or guidelines concerning retention policies for print volumes. For example, one respondent discussed their administration plans for renovation. “The administration planned the renovation with minimal involvement of the Library, since the objective was to convert most of the Library into a student union. We were given the plans after they were written and could only make suggestions which were often not incorporated into the final blueprints.” This same respondent also strongly supported retention policies, commenting “Standards would help give the library cover when asking for more space or remote storage. Also, standards might relate to accreditation which the administration must follow.” In addition, another respondent at a non-profit setting also addressed the same issue “Working with a cooperative, having the support of others outside my library, would give me some extra strength when dealing with my company's administration. I believe in working together - it is win-win. Also, since I borrow more in than I lend outward, I have a responsibility to be involved and do my part.”



1. Institution:

	Response Count
	29
answered question	29
skipped question	0

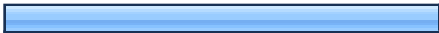

2. Your name and contact information:

		Response Percent	Response Count
Name:		100.0%	29
Email Address:		100.0%	29
	answered question		29
	skipped question		0

3. Reporting structure:

		Response Percent	Response Count
To University Library		53.8%	14
To Health Sciences Center		46.2%	12
	answered question		26
	skipped question		3



4. Are you currently facing pressure to reduce or repurpose your library space? Or anticipate it in the near future?

		Response Percent	Response Count
Yes		65.5%	19
No		34.5%	10

Details: 23

answered question	29
skipped question	0



5. Do you have access to a remote storage facility?

		Response Percent	Response Count
Yes		58.6%	17
No		41.4%	12

Details: 21



answered question	29
skipped question	0

6. Are you having planning conversations at your library regarding your space and collections?

		Response Percent	Response Count
Yes (please answer question 7)		82.1%	23
No (please skip to question 8)		17.9%	5

answered question	28
skipped question	1

7. If you answered 'Yes' to Number 6:

		Response Percent	Response Count
Within your library only		37.5%	9
Within your institution's library system		62.5%	15



How far along in your planning are you? 19

answered question	24
skipped question	5

8. If you answered 'No' to Number 6, why not?

	Response Count
	7
answered question	7
skipped question	22



9. Are you participating in, or planning any large scale print reduction projects?

		Response Percent	Response Count
Yes		65.5%	19
No		34.5%	10



Details: 22

answered question	29
skipped question	0



10. Are you participating in, or planning any cooperative retention projects?

		Response Percent	Response Count
Yes		44.8%	13
No		55.2%	16
	Details		17
	answered question		29
	skipped question		0

11. Would you be interested in exploring the potential for cooperative retention policies or projects?

		Response Percent	Response Count
Yes		92.9%	26
No		7.1%	2
	answered question		28
	skipped question		1

12. Is your library participating in the Google (or other) large scale digitization projects?



		Response Percent	Response Count
Yes		37.9%	11
No		62.1%	18
	Details:		7
	answered question		29
	skipped question		0

13. If you responded 'Yes' to question 12, are these influencing your collection policies?

Details:



	Response Count
	10
answered question	10
skipped question	19

14. Have you developed specific collection retention policies and principles? For books:

		Response Percent	Response Count
Yes		55.2%	16
No		44.8%	13
	Details		17

answered question	29
skipped question	0

15. Have you developed specific collection retention policies and procedures? For journals:

		Response Percent	Response Count
Yes		75.0%	21
No		25.0%	7
	Details:		17

answered question	28
skipped question	1

16. Do you have some ideas for how best to orchestrate further discussion among us?

Details:

	Response Count
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	15
--	----

answered question	15
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skipped question	14
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17. Anything else?

	Response Count
--	-------------------

	12
--	----

answered question	12
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skipped question	17
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4. Are you currently facing pressure to reduce or repurpose your library space? Or anticipate it in the near future?

1. Our pressure to reduce and repurpose came back in 2006, as a result of our Provost's desire to move additional faculty-related services into the library. Since we hadn't weeded our book collection as far back as anyone could remember, we took the 'opportunity' to weed many older, rarely used books; we also sent many older books and print journal volumes to our remote storage facility. Under the circumstances, it was relatively easy to obtain funding to buy a lot of digital journal backfiles, filling in numerous gaps in our holdings and allowing us to discard print journal volumes.
2. We are always looking at our space and how best to use it to meet customer needs.
3. No perceived urgency yet, but administrators are beginning to hint at questions of need for a big print collection.
4. We downsized our space and our collection about 7 years ago. However, space will always be an issue.
5. We are working collaboratively with the Health Sciences colleges to establish an inter-professional simulation center and visualization facility. This will occupy nearly an entire single floor of our four floors.
6. Administration studying moving older bound journals off site and repurpose space for curriculum needs.
7. Pressure, no (not in the BioMed and VetMed libraries); Desire, yes.
8. We have assigned some small group rooms to regular class use, but that's all.
9. 5,000 square feet of the library is currently being renovated for the Institutional Review Boards (IRB)
10. Reduced space in 2008/2009. This did not require elimination of materials, but did require consolidation of materials.
11. We have closed a smaller location in the school of dentistry and significantly downsized our footprint in the School of public health, returning that space to the schools. The medical school has two floors in our building and perpetually interested in getting more space.
12. As we prepare for a significantly down-sized new facility that emphasizes electronic resources we are planning to reduce space from approximately 40,000 sq. ft. to 20,000 sq. ft.
13. Traditional pressure of needing to weed to make room for new collection additions. Weeding to make collection more usable to patrons (less older materials that are lesser used). Weeding to open up space for other uses.
14. space is always at a premium in our institution.
15. Yes because we anticipate campus space planners looking at us in future -- so far, no major space degradations have occurred

16. We are expecting to give up one floor (which is about 1/4-1/3 of our space) for classrooms. This will result in moving staff offices, the circulation desk, reserve collection, reference collection, and a computer lab.
17. Closed health sciences library this past year and incorporated resources and services into the university library
18. The main library for Mayo Clinic, the Plummer Library in Rochester, has always been among the smallest of the AHC central libraries. As a result, a large percentage of the research and clinical collections in print have always needed to be stored remotely - generally based on usage. In 2008 we were directed to decommission a large nursing branch library (20,000 volumes) resulting in a huge transfer of volumes to Plummer and remote storage. We don't anticipate any further major reductions in space in the near term. We may wish to repurpose existing space for additional group study rooms as the print journal collections become less used. A major remodeling of a hospital branch library in Rochester has resulted in additional volume transfers and de-acquisition in 2010.
19. The medical school could use the library's lower level stacks for research storage (fish tanks, equipment, etc.) that can be charged to grants. The lower level is the basement and therefore is the building foundation and not requiring additional, structural support. The medical school can recover costs for building maintenance, etc. when the space is used for research. Money cannot be recovered for storing old books.
20. the pressure is coming from students for more study space
21. We have had to close some branch libraries on campus and may need to close more. Most of our health sciences is in our university Main Library now, although we have a separate Veterinary branch.
22. The pressure to repurpose library space was alleviated with the renovation of the previous library and assignment of nearly 65% of the space over to the medical school. The assignment was collaborative and voluntary
23. We are planning to move the Winkler History Center into the Health Sciences Library so have to reduce our print journal collection by about 60% to make room for the Center.

5. Do you have access to a remote storage facility?

1. Our facility is one of five state-funded regional library depositories shared by the state universities. Capacity is about 750K volumes. A few years ago, both our depository and Alden Library (where the Health Sciences Library was housed) were at capacity - hence the need to look to digital backfiles for some relief.
2. We have limited space in a regional depository that is full.
3. We have a "warehouse" on campus; however, the Library of the Health Sciences has not made use of it. We have no plans to move materials to the warehouse.
4. But we would, if the plan to move older journals goes through.
5. It is actually on campus - two storage caverns maintained by the Libraries and Minitex, and shared with libraries around the state. But the caverns are full. The Libraries are currently considering using unused University climate controlled warehouse space for older journal vols, but it would be "dark" space - not readily accessible for use.

6. We would have to piggyback with the main library and law library which both have contracts with Iron Mountain.
7. robotic retrieval system housed in main library
8. We have a warehouse where all pre-1980 journals are now located.
9. on and off campus, operated by university library, but nearly at capacity.
10. In the new plan, we will store about 40,000 volumes on the lower level of the current library space.
11. We have remote storage for 5 Ohio universities on my campus and I am the official director of it (there is a manager at the Depo).
12. We have a small storage area in another building on campus that houses older materials. But, it probably does not meet the definition of a remote storage facility.
13. Underground 15 miles off campus & oncampus
14. It's actually not quite finished and it will be on-site, not remote, and located about a block from us.
15. We share a remote storage facility with another local university (but it is full already). All of the depositories in Ohio (5, I think), are in the process of becoming a unified system which will facilitate deduping and creating more space.
16. Regional storage facility shared with 3 other state universities
17. We use a remote multipurpose storage facility in Rochester -- currently filled and with no expansion plans -- and where portions of the print collection are stored in space that is not heated or airconditioned. We also utilize the Minnesota Library Access Center (MLAC) in Minneapolis -- a statewide storage facility for academic libraries in Minnesota. Our initial allotment of space in MLAC is nearly filled. The state currently lacks the funding to build another cavern which could immediately be used by all academic libraries including Mayo Clinic.
18. Plans are underway for a remote storage facility exclusive to the university's libraries (main, medical, law). Completion will be in 2012 or so.
19. It is full.
20. Qualification of remote: Although portions of the collection were moved off site of the medical library. All collections still remain on either the main or medical campuses
21. We do have a remote storage facility through OhioLINK, but it is almost full (a deduping plan is almost in place) so this limits our ability to send materials to the facility.

7. If you answered 'Yes' to Number 6: (6. Are you having planning conversations at your library regarding your space and collections?) How far along in your planning are you?

1. Although we have taken a lot of pressure off locally by replacing print journal runs with digital backfiles, we still have a problem among the state universities with many libraries at or near capacity and remote storage facilities also at or near capacity. At the state level we are working on a plan for reducing duplication among the five regional storage facilities in a coordinated way. We are working on a document that is essentially an MOU among the participating libraries, and simultaneously working on procedures for

making the reduction process as efficient as possible. We hope to have an agreement in place and begin this work later this year, but there are still a lot of issues to be ironed out. On this campus we have not begun talking to faculty about this yet, and that will be a big hurdle for us.

2. Libraries throughout the state who use the regional depositories are working together to address the space issues.
3. We added compact shelving three years ago and moved pre-1996 legacy print journals there. We have no plans to discard print collections, even with the realization of the simulation center noted above. We may have the option of moving Special Collections to a new building that will hold UIC Archives and Special Collections, along with local governmental archives...provided the project is funded by the State of Illinois.
4. discussing it for a year; avoid duplication in ordering; make sure another copy is in state before discarding
5. With health science center administration, cost estimates for storage have been discussed. Within the library, staff awareness and the mandate to purchase, when cost and platform allow, everything electronically. For the past 5-7 years our journal acquisition policy has been only unless publisher did not provide, platform was unusable/barrier or journals carried sign on passwords. Now we will do the same for books.
6. Pretty far along; it is a major theme in our strategic plan for the next two years.
7. This is an ongoing conversation; not sure what kind of answer you are looking for with this question.
8. Beginning stages, as we recognize the need for inter-institutional cooperation in this effort.
9. Pretty far. We are actively weeding the print monograph collection and are in phase 2 of a plan for removing our print journal collection. We also have an architectural drawing for the new library space.
10. Discussions only. We recognize that our print journal collection is barely being used, but we don't have money for a renovation at this time.
11. with the new facility opening in 2012, we are thinking about library spaces campus wide. Conversations and planning are currently underway and will continue
12. Our main library is also under the same pressures. We have already weeded both monographs and print journals in preparation for the move (started in 2008); most of these went to the depo. Most of the empty shelves have been moved for use at the main library. Main library is not as far along as we are.
13. Still resolving issues related to the consolidation. We are aware of different issues to consider for the future but have not finalized a long range plan
14. Space planning is an ongoing topic, most recently addressed in an approved proposal to remodel a hospital branch library in Rochester. This project will be completed later this year and will result in transfer of volumes to remote storage and de-acquisition of resources. Significant space and conservation issues remain with our archival collections (historical archives). These are the collections that are growing in print format, and other formats related to artifacts such as historic wax models, historic medical illustrations, etc.
15. We are starting to do space planning inside the library in preparations for a renovation proposal. My boss in medical school administration is aware of this goal.
16. decisions to toss paper and take down stacks have already been made

17. We have had to make some choices to get rid of print when closing branch libraries. Planning is ongoing as needs come up.
18. Discussions have just started within the library system with an environmental scan to identify purpose and perceived needs.
19. We have a well developed plan for the Health Sciences Library and are developing plans for some of the other UC libraries.

8. If you answered 'No' to Number 6, why not?

1. We know there is no more space available, but we weed judiciously.
2. Our proactive de-duplicating of journal runs between my two facilities, and our cancellation of print subscriptions in favor of electronic-only access had given us enough stack space.
3. Not necessary at this time.
4. The library was renovated about 1.5 years ago. About half the space was converted to a 24/7 area. Some was converted to office space for non-library staff.
5. We don't want to start a "space war" whereby we are forced to give up space to another department
6. We decommissioned a branch library in 2008 provided other units (non-library) with needed growth space for a few years. Ongoing budget issues could force further space issues, unfilled positions, reductions in services/resources.
7. We have a nearly new Library, built in 2005.

9. Are you participating in, or planning any large scale print reduction projects?

1. We will be participating in the statewide effort to reduce duplication among the five regional storage facilities, as noted above.
2. We continue to look at print collections and space.
3. Just to the extent that we are very actively replacing print journal subscriptions with online. We have not begun serious discussion of journal backsets.
4. We would likely participate in a CIC print reduction and retention project were it to occur. At present we have little pressure to reduce print due to space. We have transitioned to electronic periodicals for the majority of our collection. We are seriously considering withdrawing titles with secure archives at the general library at UIC (Richard J. Daley Library) Library, since there are severe space pressures there.
5. Comprehensive print collection review
6. Over the last year we have looked at our older print journals that duplicate in PubMed Central to see what we might be able to get rid of in print. One issue we have discovered is that often supplements were bound with the volumes and the supplements are not part of PubMed Central. So if we toss the bound volume, we toss the supplement and it is no longer available. We are also beginning to look at our print book collection with an eye to get rid of additional copies and PERHAPS items that have not been used in 10 years.

7. We are de-duping print journal volumes between BioMed and VetMed right now; next will compare and de-dup between my libraries and the others in the system. Not sure yet how many "shelf feet" this will free up yet.
8. Been there; done that.
9. current policy is to eliminate any print journals that have online versions; currently considering ebooks project too
10. Weeding old DEWEY collection (pre-1980) books. 90 plus % of these are discarded; remaining will be reclassified into LC.
11. We are eliminating duplicate print copies
12. See above #4
13. We have been doing a weeding project for 1.5 years now with a .5 dedicated staff member.
14. We already are down to less than 50 print only subscriptions. 3-4 years ago we have eliminated print volumes for which we felt there was a safe electronic archive. We have not mustered the manpower to re-examine the situation. Too busy developing our ERMS.
15. We have done some reductions, but only of duplicate journals and monographs. We are retaining print volumes for the indefinite future
16. Yes, done at our library.
17. We are sending many monographs to the regional storage facility and have eliminated all duplication from the journal collection. We also no longer keep any journals in print that we receive electronically.
18. We began a small digitization project related to historic reprints of Mayo Authors which have entered the public domain. An ongoing project to digitize our collections of historic medical illustrations continues. Digitization of resources related to the history of Mayo Clinic are expected to commence later this year.
19. We have already begin to recycle many print journal volumes for which a back-up copy exists at either the U Chicago or at NLM and for which we have online access. We filled two full dumpsters (though I'm not sure how many volumes this represents; this detail may come later).
20. Yes, we already get most health sciences journals in electronic-only format. We are also getting rid of print back issues as we buy electronic backfiles.
21. Significant work was done during renovation.
22. See above.

10. Are you participating in, or planning any cooperative retention projects?

1. This is just the other side of the print reduction coin for us. The draft agreement mentioned above spells out the institutions' responsibilities for preserving print copies.
2. If there is a CIC initiative, we would likely participate. We have considered the CRL initiative, but have not made a commitment to join.
3. Statewide among regental universities
4. Not yet.
5. The OhioLINK Regional Depositories have a program for the other medical schools (all public) medical schools in the state.
6. attempted state-wide retention project but it failed because of lack of administrative support and interest

7. Library systems for U of Iowa; Iowa State and U of Wisconsin are talking about keeping 1 print copy between us of any duplicates (journal runs)
8. In regards to DEWEY collection- weeding decisions are based in part on OhioLINK retention policies. Will keep copy if only one or two copies exist through OhioLINK.
9. Sort of - we've begun discussions within the CIC health sciences libraries about this issue, raised the issue with GMR, and are aware that the university library is participating in a similar discussion among the CIC library directors.
10. Not formally, but we're reviewing other library's holding lists before eliminating titles and discussing with them whether they want to accept the titles we are withdrawing.
11. The Ohio state depositories are transitioning to a shared depository system.
12. Not in any formal cooperative retention projects, although as part of CIC we expect we will be involved in any project that is undertaken
13. As part of OhioLINK/depository system in development
14. No, no one has asked us to hold/retain specific titles. We are mindful that we have some historic print titles and are preparing to study this question. But with more retrospective journals going online, and with Google digitizing books, there may not be much print for us to preserve/hold or retain.
15. only between our branches
16. Have not heard from CIC what plans are, but we do not have a lot of print journals left.
17. This effort is primarily through OhioLINK.

12. Is your library participating in the Google (or other) large scale digitization projects?

1. We are scheduled to be one of the last CIC libraries to contribute resources.
2. We sent a number of govt documents to Google last year, and are gearing up this month (March 2010) to begin sending books and journal volumes. Digital access is provided through CIC's HathiTrust.
3. Cooperative arrangement with the Ohio Historical Society & Ohio Memory Project.
4. Google, Hathi Trust, Michigan Digitization Project, and others
5. As part of CIC Google partnership
6. We are not participating in Google, but we have created links in our OPAC to Google-digitized collections, e.g., various volumes of "Proceedings of the Meetings of the Staff of Mayo Clinic" which were digitized as part of the UC Berkeley Google project. We've been able to pick the best examples of digitization for our links.
7. We are contributing approx. 42,000 volumes to the university's Google commitment. We begin sending volumes this summer.

13. If you responded 'Yes' to question 12, are these influencing your collection policies? Details:

1. Our collection policies are affected by the cost of print subscriptions and in the Daley Library, space considerations.
2. Not yet, but likely in the future.
3. No
4. Not really. Decisions are based more on preservation & access than collection development.
5. Not yet
6. No
7. Not directly
8. Hasn't affected our collection policies, but provided increased access to fulltext.
9. Yes, Google digitization will force to ask whether we want the books back. If it's online, why keep the print unless it has some special value to the institution (e.g., a Northwestern author).
10. Not yet. We are waiting to see what Google's policies will be.

14. Have you developed specific collection retention policies and principles? For books:

1. This is only at a very basic level. Since we have the only osteopathic medical college in the state, we will retain any materials that are specifically related to osteopathic medicine. We also check OhioLINK holdings and do not withdraw any book that is the last copy in the state. If there is one or more circulating copies available elsewhere, we make a judgment call about whether the number of circulating copies remaining in the state will be sufficient if we withdraw our copy.
2. We have a retention policy that is now obsolete, given the online environment, so we need to update it.
3. We have our own informal guidelines.
4. usage
5. Our policies are very old and we are currently looking at them. Past policy on books is basically to keep almost everything. We have decided on an individual title by title basis in past. Now we are looking at more broad policies.
6. Just the typical ones in any collection development policies (ie older editions, etc). Nothing radical.
7. We keep at least one copy of every book in support of our history of medicine collection and law firm members' needs.
8. working on a pilot project currently
9. We keep everything but duplicates
10. Collection development is related to needs of Ohio state employees and agencies.
11. We have always had these but have recently updated them.
12. Monographs are retained in print, with weeding done only to reduce duplication, removal of irredeemably damaged materials, or still

13. Very rough ones from our head of tech services (who's also on the depo system task force)
14. Example: Definition of "History of Medicine" date ranges related to transfer of key items to the History of Medicine Library.
15. This type of policy is something we need to do.
16. No, selectors are making those decisions about their subject areas individually.
17. But policies will be under review along with discussion of space.

15. Have you developed specific collection retention policies and procedures? For journals:

1. See note for question #14. Again, we make an exception for osteopathic materials; otherwise we check OhioLINK before discarding print copies of journals that have been replaced by digital backfiles. If there are at least two other copies of a print journal in OhioLINK, we feel safe in discarding our copy.
2. Isn't this basically the same question as #14?
3. Yes to the extent that we prefer electronic to print subscriptions and are reducing duplication between the two formats as well as among various locations in the UIC University Library.
4. switch to online only; retain what isn't available online; if online move to storage; departmental ranking based on usage, cost, and relevance to research and teaching for future cutting
5. Old policy --keep everything.
6. Yes, but mainly in regards to the "low hanging" fruit (ie duplicates).
7. We keep one run of every print journal we ever subscribed to.
8. 1 electronic copy and 1 print copy of things we already have in print; only cancel print if there is guarantee of perpetual access.
9. Most print journals are permanently maintained; although some print subscriptions have been cancelled when title is available electronically through the OhioLINK consortium.
10. At least one print copy is retained among all the university libraries. Which library keeps and which titles are kept in more than one place are negotiated case-by-case.
11. We have always had these but have recently updated them.
12. last 25 years.
13. Statement is available upon request and will be available on our website soon.
14. Example: De-acquire volumes related to peripheral collection areas, e.g., mathematics, when the full run is included in JSTOR.
15. Same as #14.
16. So far, we are mostly only getting rid of older print when we have purchased backfiles and are assured of archival access and ILL ability. We get new journals as electronic only most of the time and make sure that ILL and archival access are part of the deal.
17. See above.

16. Do you have some ideas for how best to orchestrate further discussion among us? Details:

1. I favor collaborating with CIC, especially the Health Sciences Group. Also, I think that the GMR can and will facilitate conversation and planning among interested parties. A committee or planning group would be helpful, as would a face-to-face meeting or series of meetings.
2. subcommittee to investigate; focus groups.
3. Perhaps share policies and the rationale behind. Each institutions' context will be different so it's not like one or two policies will fit all. Set up a discussion forum, post some policies and ask people to participate.
4. After determining GMR RL interest, have RML set up a conference call to discuss further with those interested and help shape a potential response/project in the RML contract.
5. Query us as to who has an historical mission vs. who need only support current clinical and research needs. That totally drives what we keep.
6. I'm wondering if rather than trying to find one fit for all of the region we might look at several of these groups of libraries working together to determine who holds print copies. There are so many issues at play here that I can't imagine all of us working together. We are all losing space which means losing journals--what can we commit to keeping in a realistic way. The other thought is to do this through the CIC and libraries not in the CIC can look to us for resources if they need them.
7. Identify a core group of interested institutions to discuss, plan, and implement a pilot project.
8. I'm not really hopeful that this can be done on any large scale because our decisions are largely determined by specific institutional imperatives. Most of us are getting out of the print repository business and will depend on a few large institutions that for now have decided to keep print or groups (Lockks, Google) that are digitizing collections for preservation purposes and that will act as clearinghouses for archival materials.
9. Not really. The retention decisions and withdrawals are happening now and may be completed by the end of the summer.
10. Gathering information about print journal holdings among the GMR libraries to inform print retention decisions, as well as to use as a basis for discussion of a more formal collaborative print retention program for the region.
11. No, but I am interesting in participating . . .
12. The Minnesota Library Access Center (academic library storage in caverns beneath the U. Minn.) is nearly filled, but space pressures remain at the Twin Cities campus of UM, including the Bio-Medical Library. RML discussion or discussion among the CIC and should attempt to avoid adding to statewide political and funding issues related to remote storage space.
13. E-mail discussions. Please ask for input if a retention committee is formed. Provide opportunities for input from each Library.
14. Let's just get together and figure things out!
15. Surveys sometime provide us with lots of useful information. How about posting results from this and other surveys on the subject. Then discussion.

17. Anything else?

1. I welcome further discussion and appreciate the follow up and the survey gathering information from the group.
2. important in today's world.
3. Perhaps a "summit" held in Chicago where we can go and learn from 1. those who have large university libraries that can "help" them with offsite storage 2. those that are on their own and have their own offsite storage 3. those that are participating in the Google digitization project --what does it mean for the library, for the users, for the future. Does this mean they can wipe out their library collections because they will all be digitized -- that's what a lot of health sciences deans think and we know that's not true. But helping us articulate that--the facts-- from those
4. Do a poll to see if anyone is interested in a conversation at MLA-DC (or if schedules are already too packed).
5. Hope this yields some useful information...
6. good topic to survey, I'm very interested in the results
7. We need to remember what happened with the Medical Library Center of New York and any lessons we can learn from their experience.
8. Thank you for conducting this survey. The discussion is one we cannot continue to postpone.
9. Ohio is working toward a shared depository system. I might be able to explain that more clearly a year or so from now.
10. Any ideas on what we would be expected to retain in print? Would the old Brandon-Hill Core Collections for books and journals be useful as a starting point? I assume that some libraries would be expected to retain specialized collections in print. Who will make that decision? I expect that we will retain a print collection in the foreseeable future. We have designated a print collection for emergencies. Of course, we are also migrating to online collections as well. Do you have examples of print collection retention policies and principles that you could share? We still have a collection development policy for the programs on our campus.
11. Thanks for asking and get moving on this issue. Also, we need to hear more about what NLM expects of the RML and its resource libraries.
12. regarding question number 3 - we do not report to a university library or a health sciences center -- we report to university administration